CENTRAL INTELLICENCE ACENCY

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OF THE UNITED ST AND 794, OF THE LATION OF ITS CO	INTAINS INFORMATION AFFECTING THE NATIONAL DI TATES, WITHIN THE MEANING OF TITLE 18, SECTION U.S. CODE, AS AMENDED. ITS TRANSHISSION OR NITENTS TO OR RECEIPT BY AN UNAUTHORIZED PER: W. THE REPRODUCTION OF THIS FORM IS PRONII	REVE- T	HIS IS UNE	VALUATED INFORMATI	ON
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- 1. The Trnava State district hospital (Statna okresna nemocnica) employed a total of about 300 persons. Dr. Tibor Resko was Director of the hospital and Stefan Ferencak was the deputy director (spravea). The hospital staff was composed of approximately to physicians, most of whom were young men, with the exception of the section heads. The physicians were either of Primarius rank (specialists) or Secondarius rank (specialists in training or general practitioners). Some of the physicians at the hospital anticipated being called into the army in the spring of 1952. In addition to the medical members of the hospital staff, there were 70 nurses, all members of a religious order. These nurses were considered to be very well qualified; they had taken a two-year training course for nurses at a school in Bratislava which had been established prior to the Communist coup in 1948. The entire OUNZ (Okresny ustav narodneho zdravia District Public Health Administration) which included the hospital staff, employed 700 persons.
- 2. The Trnava hospital received a yearly grant of money from the Ministry of Social Affairs (sic). In 1951 one hospital was granted 45 million crowns. In 1952, the OUNZ, of which the hospital is a subordinate section, received only 30 million crowns, which was less than the hospital alone received in 1951. The hospital collected 150 crowns per day from patients not employed by the government. This money, however, had to be turned over to the State Health Insurance Office.

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- 3. Workers in the CSR are required to belong to the State Health Insurance Plan and must contribute a stipend from their wages to the Health Insurance Office. Medical care was supplied free; the hospital received no extra money because of the patient load. Each year the hospital included in its budget provision for payment for required medical items. This system was frequently impractical, however; a paraffin bath ordered in 1950 did not arrive until February 1952 and had to be refused because the hospital could not pay for the item.
- 4. The Trnava Hospital was able to obtain some minor medical supplies from a local pharmacy. Although there were five pharmacies in the city, only one could be used by the hespital, which had no pharmacy itself. The supply of drugs was always very low in the hospital (this was true of Slovakia in general). Medical supplies suddenly disappeared after the war and stocks could not be brought back to normal. The Trmava Hospital ordered its drugs from Chemodroga and its medical instruments from Chirana. These two firms were the distributors for all of the CSR. Each had its main office in Prague with sub-offices in Brno and Bratislava. Slovak orders were sent only to the Bratislava sub-office. Chemodroga and Chirana obtained material for distribution from factories in the CSR or from imported stocks. The hospital requested in one large order the drugs, glassware, and equipment needed for the next year. This system made it impossible to replace depleted stocks until the following year. Orders were frequently not filled since many items were never in stock. The hospital had 15 ambulances, two of which were reserved for the use of the Infectious Diseases Section. A garage near the hospital was used to house some of the ambulances. The hospital also had several trucks which were used for household jobs. There were vegetable gardens on the hospital grounds, but food was also brought in from the city. Patients were fed from hospital supplies and did not have to depend on relatives for food. Only minor food supplies, 4,66 fruit, were permitted to be brought to the patients. Patients were permitted to the Children's Infectious Diseases, or Gynecology Sections.
- 5. There was no regular affiliation which existed between other hospitals and the one at Trnava. \_\_\_\_\_\_\_\_ the staff of Znojmo Hospital and the Trnava Hospital exchanged one visit, in the period after World War II, but no close association developed. In 1951, a Soviet commission paid a visit to the clinic but no other assistance or cooperation was received from Soviet scientists by the hospital.
- 6. A secret order was received from Bratislava in April 1952; it stated that a 14-room station for blood collection had to be set up at the hospital! within three months.

# Staff

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25X1	7.		persons at	the hospital	,	by 25X1
		section:			, , , , , , , , , , , , , , , , , , ,	<u> </u>

- (a) Director: Dr. Tibor Resko was the director of the hospital and also Chief of the OUNZ; Nay 1952, he was a 25X1 Secundarius in Roentgenology, but expected to be recognized as a Primarius within a few months. His responsibility at the hospital included both administrative and professional problems. He was married and had a child.
- (b) Deputy Director, Stefan Ferencak, who was not a physician, was deputy director of the kospital. He was charged with directing all household affairs, eg, maintenance, food supply, laundry, personnel, and other non-medical aspects. He had no control over the professional activities of the physicians on the staff. Ferencak was a good organizer and qualified for his position. He had 15 assistants.

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(c) Surgical Section. Dozent Andrey Kukura, 43, a brain surgeon, was in charge of this section. His methods were based on the American school. (Surgeons in Slovakia for many years based their techniques on the German and other European Schools.) A doctor in Turciansky Svate Martin, who was in England during World War II, is known for his English method. Older surgeons prefer German methods; Dr. Jan Knazovicky at Kosice operates according to German methods and is regarded as old fashioned by other Slovak doctors. Dr. Rappant, a lung surgeon, at Olomouc, is generally acknowledged as the outstanding surgeon in the CSR; he spent some time in the US, Paris, and London after World War II. Kukura came to Traava in 1951 from the Bratislava surgical clinic. Dr. Kukura insists on close attention to the patient before, during, and after operations. He utilizes blood transfusions throughout these periods and is meticulously careful to preserve aseptic conditions. The Soviets are said to be attempting to make the hospital resemble the home, but Kukura does not consider this idea practical and tries to keep furniture at a minimum, in order to avoid dust-catchers and conditions conducive to bacterial growth. He has stated that Soviet intestinal operative procedures are archaic. He constantly gives lectures and demonstrations for his assistants and his section is the best in the hospital. Seven assistants are assigned to the Surgical Section; one of these is Dr. (fnu) Jankovic. Orthopedic and urologic surgical cases are not cared for at the hospital but are referred to Bratislava.

Internal Medicine

(d) The Chief of Internal Medicine is Primaer (Primarius) Alojs Pechan, 45, a small, sickly man. Although a member of the Communist Party, he is not ideologically convinced.

but Pechan is active; he is well-liked and spends considerable time in the hospital with his patients. There are two assistants in this section.

#### Children's Section

(e) Dr. Jan Grujbar, 43, a non-Communist, is Chief of this section.
He came to Trnava in 1945 from Bratislava where he was an assistant.
Formerly a hospital director, Grujbar is a good organizer; his section is excellent. He has two assistants and the work is divided into internal medicine and nutrition; Grujbar was responsible for installing incubators of American manufacture in his section.

#### Skin and Venereal Diseases

(f) The Chief of this section is Pavel Zarnovicky, 60, a non-Communist. Zarnovicky came from Bratislava Hospital. His methods are old-fashioned. Zarnovicky is the leader of the Anti-Venereal Disease Organization in Trnava and Sered 4817N-1744E7. He has two assistants in his section.

#### Gynecology

(g) Dr. Elemer Nemec, 62, a non-Communist, is gynecologist for the hospital. He was formerly in Bratislava and later in Užhorod (Carpatho-Ukraine). His methods are patterned after the German school. He conducts a course for midwives. Nemec has four assistants.

### Ophthalmology

(h) Dr. Stefan Nyulassy, a non-Communist, 50, is ophthalmologist at the hospital. He was formerly an assistant at Bratislava. He is a good worker but has very few instruments. There is one assistant in his department.

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## Ear, Nose, and Throat Section

(i) The Chief of ENT is Dr. Julius Golda, a non-Communist who was an assistant at Bratislava. Although he has two assistants, Golda does not have much ambition and refers all patients to Bratislava for operations. His predecessor at Trnava is said to be in Detroit.

#### Roentgenology

(j) Pavel Palan (who changed his name from Politzer) is roentgenologist. He is 42, a Jew, a non-Communist, a former student at Budapest and Bratislava. He has four assistants.

### Stomatology

(k) The Chief of Stomatology is Dr. Koloman Bella, 43, also a non-Communist. He formerly was an assistant at Bratislava. Bella is clever; he has one assistant and one technician.

## Infectious Diseases

(1) Dr. Frantisek Osvald, 32, is Chief of this section. He is a specialist in children's diseases and an associate of Dr. Grujbar. He has two assistants. Dr. Osvald is not a Communist.

#### Neurology

(m) The neurologist at Trnava is Dr. Alojs Andarovic, 35, a non-Communist formerly an assistant in Bratislava. He is clever and has modern ideas. Andarovic has one assistant.

#### Tuberculosis

(n) The Chief of the Children's Tuberculosis Section is Dr. Frantisek Sykora, 32-35, a non-Communist and formerly an assistant at a TB children's clinic in Moravia. Sykora also is a specialist in children's diseases and an associate of Dr. Grujbar. He has two assistants. The Chief of the Adults' Tuberculosis section is Dr. Pavel Ugor, 36, who spent one half year with Kuklova at the SZU in Bratislava. He is a specialist in internal medicine and was formerly with a sanatorium in Kvetnica. He has two assistants. Ugor is not a Communist. In Sucha, eight km. from Trnava, there is a 50-bed section used for the treatment of tuberculosis cases which appear responsive to care.

#### Medical Statistics

(o) Dr. Frantisek Pirovarci, 35, is Chief of the Statistics Section.

A physician t, he was formerly associated with Dr. Palan.
Pirovarci is not a Communist.

# Laboratory

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Six laboratory workers were also employed in this section. The laboratory performed bacteriological, serological, histological and biochemical analyses, blood counts, and autopsies. Equipment was scarce. The laboratory had no pH meter, no colorimeter and no photometer. Platinum loops for bacteriological technique were lacking. Sterile work was acceptable in spite of the fact that the lab had no autoclave. Glass slides and glass cover slips were of American manufacture and had been saved by the religious nurses from pre-war stocks. Graduated pipettes were scarce, as were beakers.

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Petri dishes were available but were poorly made. Glass containers for macro specimens, eg, autopsy tissues were scarce. Centrifuges were not available (Czechoslovakia makes centrifuges with 3000 rpm). The lab had no Van Slyke apparatus. An American microtome (from UNRRA stock) was obtained for the lab from the Turciansky Svate Martin Hospital. A Reichart-Wien microtome was on hand. Dyes for laboratory use were very scarce. Bacteriological and hematological differentiation studies were practically impossible. Hydrochloric acid was unobtainable. Spofa, the manufacturing organization, does not furnish dyes in crystalline form but only as solutions which either deteriorate or are poorly prepared. The lab had a smaller subordinate lab in the Trmava Health Center (Trnava Zdravotne Stredisko).

### Hospital Buildings

- 8. The hospital is located in Rooseveltova Ulica, in the quarter of Trnava known as Tulipan. Enclosed by a park-like compound, the hospital has the following buildings (See Encl (A)7.
  - Point #1 THIS IS A ONE-STORY, BRICK BUILDING, approximately 10 x 18-20 m. It contains about six very large rooms which are used by the director and another doctor for living quarters.

    Prior to 1950, the hospital director, his wife, and two children occupied the entire building. At the time of the Director's death in 1950, the building was partitioned and prepared for occupancy by the present tenants.
    - #2 THIS TWO-STORY, BRICK BUILDING is 12 x 25 m and has a gabled, red tile roof. More than 50 years old, it was constructed during Austro-Hungarian rule. The first floor is occupied by the Sex and Skin Diseases Section; the entrance is at the east end of the building. Entrance to the second floor, which is used by the Gynecology Section, is on the north side of the building. There is no central heating available.
    - #3 THIS FOUR-STORY, BRICK BUILDING is L-shaped; one wing is 30 m. long, the other 70 m. It has a flat roof. The building was constructed in 1935-36. A children's section, an X-ray room and the Laryngology Section are located on the first floor. The second floor contains another children's section (above the one on the first floor), a roentgen section, an ophthalmology section, and a kitchen. The third floor includes a children's tuberculosis ward, a kitchen, and an internal medicine section. An additional section on the fourth floor is used for internal medicine; the rest of the floor is an open roof used for air and sum baths for the tubercular patients. The third-floor tuberculosis ward was set up for children in February 1952; before that it was used for adult TB cases. Hospital personnel were housed in the cellar; supplies were also kept there.
    - #4 THIS ONE-STORY BRICK BUILDING, five x 12 m, was used by the administrative staff. The offices of the director, deputy director and cashier, as well as the file and business sections were located there.
    - #5 THIS ONE-STORY BRICK BUILDING, SIX X five M, also houses administrative offices. Each day, one doctor is assigned to the reception office in this building to accept patients and refer them to the proper section.

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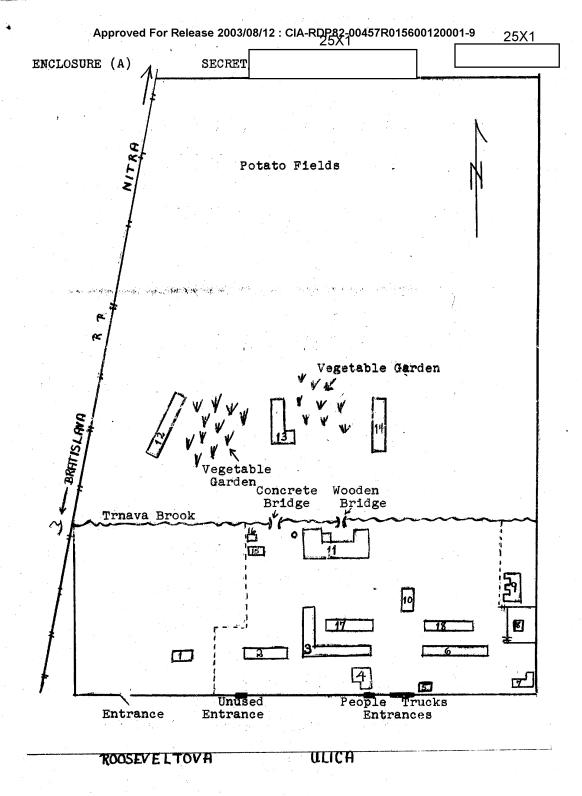
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- #6 THIS TWO-STORY BUILDING with gabled, tile roof, was constructed before World War I. Used by the Surgical Section, it contained two operating rooms, the larger of which was at the west end of the building on the second floor. This operating room contained two operating tables. A smaller operating room is located on the first floor in a room formerly used as a dispensary.
- THE L-SHAPED BUILDING, 12 x 20 m, has only one story; it contained the laboratory, autopsy room, animal room, and kitchen.
- THE ONE-STORY BRICK BUILDING was used as a residence by Dro Pirovaroi . it contains four rooms and is completely enclosed by a wire fence.
- #9 THIS IS A TWO-STORY BRICK BUILDING, 10 x 25 m, erected in 1932. The Infectious Diseases Section is located on the first and second floors; the Dental and Neurology Sections have two or three rooms in the cellar. The rooms in this building are quite large, which is occasionally impractical for conditions surrounding infectious diseases. The roof, which is flat, is used for sun baths. Eighty beds are available.
- #10 THIS TWO-STORY BRICK BUILDING, eight x six m, has a gabled tile roof. It was formerly used for the Infectious Disease Section, but now houses, on the second floor, the Adults: Tuberculosis Section. The first floor contains a roentgen and a therapy section. Twenty beds are available. Upon arrival at the hospital, TB patients report immediately to this building.
- #11 THIS IS A TWO-STORY BRICK BUILDING, 15 x 80 m; it contains on the first floor a kitchen, dining room for physicians, supply room, laundry, disinfection room, and central heating unit. The second floor is used as living quarters by the administrative staff and deputy director. There is also a pressing room above the supply section. Adjacent to the building, at the northwest end, is a chimney, approximately 43 m. high.
- #12 THIS THREE-STORY BRICK BUILDING, 70 x eight to 10 m. with a flat roof, was built in 1934. It is used as a residence for the nurses and technical personnel.
- THIS BRICK BUILDING, 50 x eight m, two-stories with a flat roof, was used as a residence by the nurses, who were members of a religious order. It was built in 1934 and contained a chapel.
- THIS ONE-STORY BRICK BUILDING, 30 x five m, was used as a residence for nurses and technical personnel. It also contained stalls for horses and donkeys
- THIS IS A ONE-STORY BRICK BUILDING, 12 x four m. in which was located the Cultural Section consisting of a library and meeting room used for political and medical discussion; a classroom for nurses was located at one end. A garage was located at the other end of the building.
- #16 THIS ONE-STORY BRICK BUILDING, six x four m, was used as a shop.
- #17 THESE WERE UNDERGROUND AIR RAID SHELTERS which extended above the ground like bunkers. One Point #177 was used for storing garoline; the other Point #187 for storing potatoes. An order received #18

in April 1952, stated that both air raid shelters BHOULD DE ENLARGED.

A small villa near the hospital compound had been used as a residence by Dr. Josef Utrata, a laryngologist at Bratislava. Utrata had another surname, Banyay, a Hungarian name which he no longer uses.

Enclosure (A): Trnava Hospital



Trnava Hospital (not drawn so ssale)

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